

CIVIL SERVICE COMMISSION
CITY OF WEST ALLIS
WEST ALLIS, WISCONSIN 53214

Announcing a RECRUITMENT for the position of:

LIBRARY CIRCULATION SERVICES REPRESENTATIVE

(The Library is establishing a pool of candidates to cover approximately 10-12 hours of work per week, including a combination of day, evening, and weekend hours.)

DUTIES: A Library Circulation Services Representative interacts with customers to provide information in response to inquiries about circulation services and/or account status and works to resolve problems by providing solutions in accordance with established Library guidelines. Typical duties include, but are not limited to: assists patrons in the use of circulation-related Library automation; issues and receives Library materials via a computer terminal; processes holds; computes and collects fines on overdue materials; reconciles daily cash register receipts/drawers; updates customer account information as necessary; operates various modern office equipment and applicable software/database programs; types a variety of letters, forms, and other materials; responds promptly to customer inquiries; resolves customer complaints delivering quality, personalized solutions; answers telephones with responsibility of providing requested information in accordance with instructions and/or channels calls to designated resources for appropriate action; records details of inquiries, comments, complaints, and action taken; prepares notices and collection letters to borrowers; sorts and routes mail and other Library materials; inspects incoming materials for damage and prepares notices of damages; compiles a variety of data from Library records and files for reports and correspondence; prepares documents for digital scanning and performs scanning; maintains information kiosks; files subscription services; maintains prompt, predictable, and regular physical attendance; provides truthful and accurate written and verbal communications; maintains the ability to competently and credibly testify in court; performs other duties as assigned.

DESIRABLE KNOWLEDGE, SKILLS AND ABILITIES: ability to communicate and work cooperatively and effectively with managers, employees and Library patrons from diverse age groups and socio-economic and ethnic backgrounds; good skill in listening; good skill in problem analysis and problem-solving; good written and verbal communication skills; ability to organize facts and ideas, and to prepare written or verbal reports; some knowledge of Library functions; ability to learn Library and clerical tasks of a detailed nature; good knowledge of grammar, punctuation, spelling, and arithmetic; ability to write legibly; ability to file in correct alphabetical or numerical order; good knowledge of modern office practices and procedures; skill in the use of modern office equipment and software.

MINIMUM REQUIREMENTS:

- High school graduate/equivalent, preferably in a commercial course.
- Some recent paid customer service, clerical, and cash handling work experience; recent Library-related work experience or coursework desirable.
- The ability to type/keyboard from copy at a minimum rate of 35 wpm.
- Competent in the use of office computers and software, including, but not limited to, Microsoft Office Suite (Windows, Word, PowerPoint, Outlook, and Calendaring), etc., and other modern office equipment.
- Good written and verbal communication skills, including solid listening and problem-solving skills.
- Ability to withstand exposure to variable odors, cleaning products, and dust.

CONTINUED

Physical Job Demands: Possess the physical capacity to perform the duties of the position, including, but not limited to, continuous lifting, carrying, and pushing/pulling up to 50 pounds; frequent standing, walking, sitting, bending, and stooping; occasional pushing/pulling of greater than 50 pounds; ability to continuously focus for long periods of time on projects or while working on computers; ability to occasionally reach and climb; ability to use a step stool and/or work from a step ladder; and the ability to frequently kneel, twist, stretch, squat, etc.

ACTIVITY FREQUENCIES

Continuous	67 – 100% of workday
Frequent	34 – 66% of workday
Occasionally	1 - 33% of workday

This position description has been prepared to assist in defining job responsibilities, physical demands, and skills needed. It is not intended as a complete list of job duties, responsibilities, and/or essential functions. This description is not intended to limit or modify the right of any supervisor to assign, direct, and control the work of employees under supervision. The City retains and reserves any or all rights to change, modify, amend, add to or delete from, any section of this document as it deems, in its judgment, to be proper.

SALARY: The 2015 West Allis resident hourly rate range is \$14.90 to \$18.95. The 2015 non-West Allis resident hourly rate range is \$14.58 to \$18.59.

BENEFITS: THIS IS A NON-BENEFITTED POSITION.

EXAMINATION DATA: The first step in the selection process will be a review and evaluation of application materials to identify those candidates who appear to be better qualified in terms of training and experience as these relate to the duties and requirements of the position. Therefore it is necessary that applicants provide clear and specific information when completing the application materials. The examination will consist of a written test designed to assess knowledge, skills, and abilities which pertain to the position and which will be weighted 60%, and a keyboarding test (PASS/FAIL) at 35 wpm. A select number of applicants who pass both the written and keyboarding tests with a qualifying rating will be further evaluated in an interview which will be weighted 40%.

Applicants will be notified later as to the time and place of examinations.

POST-OFFER DRUG TEST: Persons offered employment must pass a post-offer drug test as a condition of employment. The City of West Allis is an at-will employer. Employment may be terminated at any time for any reason.

HOW TO APPLY: Application forms, available online at www.westalliswi.gov, or at the Human Resources Department, Room 133, City Hall, 7525 West Greenfield Avenue, West Allis, Wisconsin, 53214, must be completed and ON FILE NO LATER THAN **5:00 P.M. FRIDAY, JULY 10, 2015.**

Please note: A job interest card may not be substituted for the application form. Visit our website at www.westalliswi.gov for further information on the City of West Allis.

The City of West Allis is an Equal Opportunity/Affirmative Action Employer and does not discriminate against individuals on the basis of race, color, religion, age, marital or veterans' status, sex, national origin, disability, or any other legally protected status in the admission or access to, or treatment or employment in, its services, programs or activities.

Upon reasonable notice the City will furnish appropriate auxiliary aids and services when necessary to afford individuals with disabilities an equal opportunity to participate in and to enjoy the benefits of a service, program or activity provided by the City.

It is the policy of the City of West Allis to provide language access services to populations of persons with Limited English Proficiency (LEP) who are eligible to be served or likely to be directly affected by our programs. Such services will be focused on providing meaningful access to our programs, services and/or benefits.

PRINT NAME: _____

LIBRARY CIRCULATION SERVICES REPRESENTATIVE

Thank you for your interest in the **Library Circulation Services Representative** position with the City of West Allis' Library. The Library is establishing a pool of candidates to cover approximately 10-12 hours of work per week, including a combination of day, evening, and weekend hours. Interested applicants are required to complete this *Supplemental Questionnaire* and return it with your application. The deadline to apply is **5 p.m., Friday, July 10, 2015.**

DIRECTIONS: answer each question by checking the appropriate box.

1. Do you possess a high school diploma/equivalent?

☐ Yes

☐ No

2. Do you possess some recent paid customer service, clerical, and cash handling work experience?

☐ Yes

☐ No

If yes, indicate total number of years _____

3. Have you completed library-related coursework (this is desirable, not required)?

☐ Yes

☐ No

4. Do you have recent library-related work experience (this is desirable, not required)?

☐ Yes

☐ No

If yes, indicate total number of years _____

5. Are you able to type/keyboard from copy at a minimum rate of 35 wpm?

☐ Yes

☐ No

6. Are you competent in the use of office computers/software including, but not limited to, Microsoft Office Suite (Windows, Word, PowerPoint, Outlook, and Calendaring) etc. and other modern office equipment?

☐ Yes

☐ No

7. Do you possess good written and verbal communication skills, including solid listening and problem-solving skills?

☐ Yes

☐ No

8. Are you aware this position requires the ability to withstand exposure to variable odors, cleaning products, and dust?

☐ Yes

☐ No

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9. Possess the physical capacity to perform the duties of the position, including, but not limited to, continuous lifting, carrying, and pushing/pulling up to 50 pounds; frequent standing, walking, sitting, bending, and stooping; occasional pushing/pulling of greater than 50 pounds; ability to continuously focus for long periods of time on projects or while working on computers; ability to occasionally reach and climb; ability to use a step stool and/or work from a step ladder; and the ability to frequently kneel, twist, stretch, squat, etc.

ACTIVITY FREQUENCIES

Continuous	67 – 100% of workday
Frequent	34 – 66% of workday
Occasionally	1 - 33% of workday

☐ Yes

☐ No

The above-completed information is true to the best of my knowledge.

Signature of Applicant

Date Signed

Printed Name



APPLICATION FORM

ATTENTION APPLICANTS - PLEASE READ

Following are important points to know about the City of West Allis application process:

1. **Applications must be completed in full.** Applications not completed in full may be subject to disqualification.
2. A completed application form is required. You may supplement the application form with a resume; however, providing a resume does not exclude you from completing the application form in full.
3. It is to your advantage to be clear and thorough when completing the application, as it is the only means the City has of reviewing your qualifications for employment. We cannot assume more than what you tell us.
4. If you faxed or emailed your application, you still need to mail in or drop off the original in order to be considered for employment.
5. After all the applications are reviewed, the most qualified candidates will be invited to participate in other phases of the hiring process. All applicants are evaluated on job-related factors only.
6. If you are planning to be out-of-town within the next 90 days, please indicate the dates you will not be available on the front section of the application form. Dates of unavailability will be reviewed to determine if any accommodations are feasible.
7. It is the policy of the City of West Allis to provide reasonable accommodations for qualified individuals with disabilities who are applicants for employment. If you are a qualified individual with a disability and need a reasonable accommodation in the testing or interview phase of our hiring process, please contact the Human Resources Division at (414) 302-8270 or e-mail jbarwick@westalliswi.gov at least 72 hours (i.e., three (3) work days) in advance. Each request for accommodation will be reviewed on a case-by-case basis and accommodated unless it is determined to be unreasonable.
8. If you are having problems completing the application form or have any questions or concerns, contact the Human Resources Division.

The City of West Allis is an Equal Opportunity/Affirmative Action Employer and does not discriminate against individuals on the basis of race, color, religion, age, marital or veterans' status, sex, national origin, disability, or any other legally protected status in the admission or access to, or treatment or employment in, its services, programs or activities.

Upon reasonable notice the City will furnish appropriate auxiliary aids and services when necessary to afford individuals with disabilities an equal opportunity to participate in and to enjoy the benefits of a service, program or activity provided by the City.

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(APPLICANT MAY RETAIN THIS PAGE)



Human Resources Division
7525 West Greenfield Avenue
West Allis, Wisconsin 53214

Exam No. _____

Telephone: 414-302-8270
Fax: 414-302-8275
www.westalliswi.gov

City of West Allis
An Equal Opportunity Employer

APPLICATION FOR EMPLOYMENT

IMPORTANT: READ THE INSTRUCTIONS CAREFULLY BEFORE FILLING OUT YOUR APPLICATION. EXCEPT WHERE NOTED, ALL REQUESTED INFORMATION MUST BE FURNISHED. THE INFORMATION YOU GIVE WILL BE USED TO DETERMINE YOUR QUALIFICATIONS FOR EMPLOYMENT. PLEASE TYPE OR PRINT.

Dates of unavailability (If you are planning to be out-of-town within the next 90 days, please indicate the dates you will not be available):

Position applied for _____

Name _____
(LAST) (FIRST) (MIDDLE)

Social Security Number _____

Other names under which you have been legally known _____

Address _____
(STREET) (CITY) (STATE) (ZIP)

Phone Number: Home _____ Cell _____

E-Mail Address _____

Are you at least 18 years old? ☐ Yes ☐ No

Do you have the legal right to live and work in the United States? ☐ Yes ☐ No

Do you wish to have the information contained in your
application materials remain confidential as permitted by law? ☐ Yes ☐ No

If the job requires use of a motor vehicle, do you have a valid Wisconsin Driver's License? ☐ Yes ☐ No

If the job requires use of a Commercial Driver's License (CDL), do you have a valid CDL? ☐ Yes ☐ No

List CDL classification(s) and/or endorsement(s) _____

MILITARY SERVICE:

Have you ever served in the U.S. Armed Forces, National Guard or Military Reserves? ☐ Yes ☐ No

Branch of Service _____ Dates of Duty: From ____/____/____ To ____/____/____
MM / DD / YYYY MM / DD / YYYY

Per DD Form 214:

Type of Separation _____ Character of Service _____

Narrative Reason for Separation _____

(List and detail individual position(s)/rank(s) held under work history)

EDUCATION AND TRAINING:

Do you have a High School Diploma? <input type="checkbox"/> Yes <input type="checkbox"/> No Name High School: <hr/> City/State: <hr/>	Do you have a GED? <input type="checkbox"/> Yes <input type="checkbox"/> No From Where: <hr/> City/State: <hr/>	If <u>no</u> High School Diploma or GED, circle the highest grade or year completed: <div style="text-align: center;"> 6 7 8 9 10 11 12 </div> From Where: <hr/> City/State: <hr/>
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Training Beyond High School (Technical College, College, University, or other schools you have attended)

Name and Location	Graduated	Degree Conferred	Major
.....	<input type="checkbox"/> Yes <input type="checkbox"/> No		
.....	<input type="checkbox"/> Yes <input type="checkbox"/> No		
.....	<input type="checkbox"/> Yes <input type="checkbox"/> No		
.....	<input type="checkbox"/> Yes <input type="checkbox"/> No		

List any other education, training, license(s) and/or certificate(s) – be specific and include dates.

WORK HISTORY:

GIVE A COMPLETE RECORD OF ANY EMPLOYMENT, SELF-EMPLOYMENT, MILITARY SERVICE AND/OR VOLUNTEER WORK YOU HAVE HAD IN THE PAST 10 YEARS. Start with your current or most recent job. Indicate any change in job title under the same employer as a separate position. You may include positions beyond the 10-year period if they are related to the position for which you are applying. Although resumes are welcome, they may not be substituted for the information requested below.

PRESENT OR MOST RECENT EMPLOYER	ADDRESS OF BUSINESS (STREET AND CITY)	KIND OF BUSINESS
YOUR TITLE	REASONS FOR LEAVING	NAME, TITLE & PHONE NO. OF SUPERVISOR
YOUR DUTIES		FROM (MO. & YR.) TO (MO. & YR.)
		<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME (_____ HRS. PER _____)
		ACTUAL HOURLY RATE/SALARY STARTING ENDING \$ _____ PER _____ \$ _____ PER _____

EMPLOYER	ADDRESS OF BUSINESS (STREET AND CITY)		KIND OF BUSINESS	
YOUR TITLE	REASONS FOR LEAVING	NAME, TITLE & PHONE NO. OF SUPERVISOR		
YOUR DUTIES		FROM (MO. & YR.)	TO (MO. & YR.)	
		<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME (_____ HRS. PER _____)		
		ACTUAL HOURLY RATE/SALARY STARTING ENDING \$ _____ PER _____ \$ _____ PER _____		
EMPLOYER	ADDRESS OF BUSINESS (STREET AND CITY)		KIND OF BUSINESS	
YOUR TITLE	REASONS FOR LEAVING	NAME, TITLE & PHONE NO. OF SUPERVISOR		
YOUR DUTIES		FROM (MO. & YR.)	TO (MO. & YR.)	
		<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME (_____ HRS. PER _____)		
		ACTUAL HOURLY RATE/SALARY STARTING ENDING \$ _____ PER _____ \$ _____ PER _____		
EMPLOYER	ADDRESS OF BUSINESS (STREET AND CITY)		KIND OF BUSINESS	
YOUR TITLE	REASONS FOR LEAVING	NAME, TITLE & PHONE NO. OF SUPERVISOR		
YOUR DUTIES		FROM (MO. & YR.)	TO (MO. & YR.)	
		<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME (_____ HRS. PER _____)		
		ACTUAL HOURLY RATE/SALARY STARTING ENDING \$ _____ PER _____ \$ _____ PER _____		
EMPLOYER	ADDRESS OF BUSINESS (STREET AND CITY)		KIND OF BUSINESS	
YOUR TITLE	REASONS FOR LEAVING	NAME, TITLE & PHONE NO. OF SUPERVISOR		
YOUR DUTIES		FROM (MO. & YR.)	TO (MO. & YR.)	
		<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME (_____ HRS. PER _____)		
		ACTUAL HOURLY RATE/SALARY STARTING ENDING \$ _____ PER _____ \$ _____ PER _____		
EMPLOYER	ADDRESS OF BUSINESS (STREET AND CITY)		KIND OF BUSINESS	
YOUR TITLE	REASONS FOR LEAVING	NAME, TITLE & PHONE NO. OF SUPERVISOR		
YOUR DUTIES		FROM (MO. & YR.)	TO (MO. & YR.)	
		<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME (_____ HRS. PER _____)		
		ACTUAL HOURLY RATE/SALARY STARTING ENDING \$ _____ PER _____ \$ _____ PER _____		
EMPLOYER	ADDRESS OF BUSINESS (STREET AND CITY)		KIND OF BUSINESS	
YOUR TITLE	REASONS FOR LEAVING	NAME, TITLE & PHONE NO. OF SUPERVISOR		
YOUR DUTIES		FROM (MO. & YR.)	TO (MO. & YR.)	
		<input type="checkbox"/> FULL TIME <input type="checkbox"/> PART TIME (_____ HRS. PER _____)		
		ACTUAL HOURLY RATE/SALARY STARTING ENDING \$ _____ PER _____ \$ _____ PER _____		

Use a separate sheet to continue with any additional qualifying employment data, using same format as above.

If you were discharged for cause from any employment, state the details: _____

List any equipment, machines, tools, or computer software you are skilled in using.

VIOLATIONS OF LAW: A Police background check may be conducted prior to a job offer.

Are you currently subject to a pending charge? ☐ Yes ☐ No

If yes, what is the pending charge? _____

Have you ever been convicted of operating a vehicle while intoxicated (OWI) or any other violations of law excluding minor traffic violations? ☐ Yes ☐ No

If yes, list and detail what you have been convicted of, date and location of conviction, and the penalty imposed: _____

(The City, as a matter of explicit policy, does not use pending charges or convictions as the sole criteria in its employment decisions; they will be considered only if there is a substantial relationship to the circumstances of the particular job or if bondability is at issue.)

Have you applied with the City of West Allis before? ☐ Yes ☐ No If yes, for what position(s) and when? _____

CERTIFICATION AND AGREEMENT

I certify that answers given by me to the foregoing questions and statements are true and complete to the best of my knowledge. I understand and agree that any misstatements or omissions herein subject me to disqualification or dismissal.

I authorize the City of West Allis to make such investigations and inquiries of my employment, character, qualifications, and medical history as may be necessary in arriving at an employment decision. I hereby release all employers, companies, schools or persons from all liability in responding to such inquiries made in connection with my application.

I further understand that in the event of employment by the City, my classification as a permanent employee depends upon my successfully performing work assigned me during a probationary period, where applicable.

(DATE)

(SIGNATURE OF APPLICANT)

(FOR HR OFFICE USE ONLY)

Comments: _____



ADDITIONAL INFORMATION

This form **MUST** be returned with your application materials.

The City of West Allis is an Equal Opportunity/Affirmative Action Employer and does not discriminate against individuals on the basis of race, color, religion, age, marital or veterans' status, sex, national origin, disability, or any other legally protected status.

To help us comply with Federal/State Equal Employment Opportunity record keeping and other legal requirements, please answer questions below.

Position applied for _____ Social Security Number _____

Name _____
(LAST) (FIRST) (MIDDLE)

Completion of this part of the form is voluntary. The information you provide will not be used in the decision to hire. If you choose not to complete this section, proceed to the bottom of the form for your signature and date.

Sex: ☐ Male ☐ Female Birthdate ____/____/____ Age _____
MM / DD / YYYY

Veteran Status: ☐ Veteran ☐ Non-Veteran ☐ Disabled Veteran, Disability Rating _____%

Ethnic Group:

- ☐ **Black** (Not of Hispanic Origin) – All persons having origins in any of the Black racial groups of Africa.
- ☐ **Asian or Pacific Islander** – All persons having origins in any of the original peoples of the Far East, Southeast Asia, the Indian Subcontinent, or the Pacific Islands. This area includes, for example, China, India, Japan, Korea, the Philippine Islands, and Samoa.
- ☐ **American Indian or Alaskan Native** – All persons having origins in any of the original peoples of North America, and who maintain cultural identification through tribal affiliation or community recognition.
- ☐ **Hispanic** – All persons of Mexican, Puerto Rican, Cuban, Central or South American, or other Spanish Culture or origin, regardless of race.
- ☐ **White** (Not of Hispanic Origin) – All persons having origins in any of the original peoples of Europe, North Africa, or the Middle East.

Do you consider yourself to be disabled? ☐ Yes ☐ No

[A disabled individual is: any person who has a physical or mental impairment which substantially limits one or more of such person's major life activities, or has a record of such impairment or is regarded as having such impairment. Major life activities which might be substantially limited by such impairment include: walking, talking, or otherwise communicating, self-care, socialization, work training, employment, transportation or adaptation to housing (these are examples only).]

If yes, what is the disabling condition? _____

What limitations does this condition impose on major life activities? _____

How did you hear about this job? (Please specify where applicable.)

- | | | |
|---|---|--|
| <input type="checkbox"/> Milwaukee Journal/Sentinel | <input type="checkbox"/> Job Service | <input type="checkbox"/> School _____ |
| <input type="checkbox"/> Spanish Journal | <input type="checkbox"/> City Cable Channel | <input type="checkbox"/> Community/Minority Organization _____ |
| <input type="checkbox"/> City Website | <input type="checkbox"/> Bulletin Board/Walk-In | <input type="checkbox"/> Other Advertisement _____ |
| <input type="checkbox"/> Interest Card | <input type="checkbox"/> Employee | <input type="checkbox"/> Other Website _____ |
| <input type="checkbox"/> Job Hotline | <input type="checkbox"/> Word of Mouth | <input type="checkbox"/> Other _____ |

The above-completed information is true to the best of my knowledge:

(DATE)

(SIGNATURE)